UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

_CV			
	ber if on	e has l	– been
COMP	LAIN	Г	
o you wan Yes	t a jury tı □ No	rial?	
			S RY PER Y
3	ed) COMP o you yvan	ed) COMPLAIN' o you want a jury to	COMPLAINT o you want a jury trial? Ves □ No

NOTICE

names. The names listed above must be identical to those

contained in Section II.

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

be a citizen of the same state as any plantin.
What is the basis for federal-court jurisdiction in your case?
Federal Question
☐ Diversity of Citizenship
A. If you checked Federal Question
Which of your federal constitutional or federal statutory rights have been violated?
B. If you checked Diversity of Citizenship
1. Citizenship of the parties
Of what State is each party a citizen?
The plaintiff, RATARHARA, is a citizen of the State of (Plaintiff's name)
(State in which the person resides and intends to remain.)
or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant i	s an individual:	
The defendant,	E BAY (Defendant's hame)	, is a citizen of the State of
or, if not lawfully subject of the for	-	t residence in the United States, a citizen or
If the defendant i	s a corporation:	•
The defendant,	ERAY / US F	, is incorporated under the laws of
the State of	V.V.	
	/ ipal place of business in t	the State of
or is incorporate	d under the laws of (fore	ign state)/
	ipal place of business in	
	lefendant is named in the c ch additional defendant.	complaint, attach additional pages providing
II. PARTIES		
A. Plaintiff Info	ormation	
Provide the follow pages if needed.	ing information for each p	plaintiff named in the complaint. Attach additional
RA		TARHAKA
First Name	Middle Initial	Last Name
IGA Mad Street Address	ison And April	46
County, City	<i>N</i> -	EWYORK 108Z9 State Zip Code
-917 · 993 - 2 Telephone Number		Dion Soul GVERIZON. NET Email Address (if available)

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:	FRAY				
	First Name	Last Name			
	Current Job Title (or of	other identifying information)			
	Current Work Addres	s (or other address where defer	ndant may be served)		
		VFW Y 6At State			
	County, City	State '	Zip Code		
Defendant 2:	US PAN	- Office.			
	First Name	Last Name			
	Current Job Title (or o	other identifying information)			
	Current Work Address (or other address where defendant may be served)				
	153 E 110	St N.V.	10029		
	County, City	State	10029 Zip Code		
Defendant 3:					
	First Name	Last Name			
	Current Job Title (or	other identifying information)			
	Current Work Address (or other address where defendant may be				
	County, City	State	Zip Code		

Defendant 4:

	First Name	Last Name
	Current Job Title (or other identifying information)
_	Current Work Add	ress (or other address where defendant may be served)
_	County, City	State Zip Code
III. STATEMEN	T OF CLAIM	
Place(s) of occurren	nce:	
Date(s) of occurrent	ce: May	29,2028
•	each defendant p	oport your case. Describe what happened, how you were personally did or failed to do that harmed you. Attach
On may 2 white she	9,2000 R	order a pair of Club Cubano ver were ordered on July 29. 2020
y warded	on my sh	er but i did no beceive Them
		ty your delived as i poton west
to the po	X office or	110th \$ To inquire about my stone
sheon the	e elerk	paid their no sher of history
as then de	ny ship	so I contexted chay resolution
center does	Then the	30 days and it got not respons
el atempto	to solu	The pettetation from July
to now 20	20 and	i was ingroved by they
eboy.		•

÷	
Tracking up# A423783070.US orler no# 15.05124-686	
orler m # 15.05124-686	20
ı	
INJURIES:	
f you were injured as a result of these actions, describe your injuries treatment, if any, you required and received.	and what medical
	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
IV. RELIEF	
State briefly what money damages or other relief you want the court	to order
the court 70,000 for both defen	to sit day
the court 70.000 for both defen	darto
	V

V., PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

3/10/2021	La Tarbaka	
Dat e d ′	Plaintiff's Signature	
RA	TARHAKA	
First Name madison	Middle Initial Last Name	
First Name madeson	146	
Street Address	•	
Marhattan	NV. 10029	
County, City	State Zip Code	
1-917- 993 2393	Dion soul TVER-120 N. N.FT	
Telephone Number	Email Address (if available)	

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.